

FILE NOW: FILING FEE IS \$61.25

FILED

May 15 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 758939 (3)

1. Corporation Name

HIDDEN BROOK CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

285 HIDDEN BROOK DRIVE  
PALM HARBOR FL 34683

Mailing Address

285 HIDDEN BROOK DRIVE  
PALM HARBOR FL 34683-53163. Date Incorporated or Qualified  
06/29/19813a. Date of Last Report  
06/28/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City &amp; State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City &amp; State

28 Zip

29 Country

4. FEI Number

59-2168964

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GROSSI, ANGELO  
250 A HIDDEN BROOK DRIVE  
PALM HARBOR FL 34683

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Angelo Grossi*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE  
NAME LECAPELAIN, LAURENCE C.  
STREET ADDRESS 133B HIDDEN BROOK DR.  
CITY-ST-ZIP PALM HARBOR FLTITLE S ☒ DELETE  
NAME CHURCH, MARILYN  
STREET ADDRESS 133 HIDDEN BROOK DR.  
CITY-ST-ZIP PALM HARBOR FLTITLE PD ☐ DELETE  
NAME CHANDLER, FRED  
STREET ADDRESS 218 D HIDDEN BROOK DRIVE  
CITY-ST-ZIP PALM HARBOR FLTITLE D ☒ DELETE  
NAME ESTES, JEANNE W  
STREET ADDRESS 283B HIDDEN BROOK DR.  
CITY-ST-ZIP PALM HARBOR FLTITLE VP ☐ DELETE  
NAME GROSSI, ANGELO  
STREET ADDRESS 250A HIDDEN BROOK DR.  
CITY-ST-ZIP PALM HARBOR FLTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP1.1 TITLE T D ☒ Change ☐ Addition  
1.2 NAME TESKEY, JAMES  
1.3 STREET ADDRESS 218A HIDDEN BROOK DR  
1.4 CITY-ST-ZIP PALM HARBOR FL 346832.1 TITLE S. D ☒ Change ☐ Addition  
2.2 NAME GRUBB, EDWARD B  
2.3 STREET ADDRESS 251C HIDDEN BROOK DR  
2.4 CITY-ST-ZIP PALM HARBOR FL 346833.1 TITLE D ☒ Change ☐ Addition  
3.2 NAME MACIAG, ARTHUR  
3.3 STREET ADDRESS 283C HIDDEN BROOK DR  
3.4 CITY-ST-ZIP PALM HARBOR FL 346834.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0088703

CR2E037 (9/96)